UNITED STATES PATENT & TRADEMARK OFFICE Washington, D.C. 20231

REQUISIT FOR PATENT FEE REFUND					
1 Date of Request: 34 May 2005 2 Serial/Patent # 10/5/8364					
3 Please refund the following fee(s):		4 PAI	PER IBER	5 DATE FILED	6 AMOUNT
Filing					\$ 100,00
Amendment					\$
Extension of Time					\$
Notice of Appeal/Appeal					\$
Petition					\$
Issue					\$
Cert of Correction/Terminal Disc.					\$
Maintenance					\$
Assignment					\$
Other					\$
			TAL A	\$100.00	
		8 TO	8 TO BE REFUNDED BY:		
10 REASON:			Treasury Check		
Overpayment			Credit Deposit A/C #:		
Duplicate Payment			9		
No Fee Due (Explanation):					
11 REFUND REQUESTED BY:					
TYPED/PRINTED NAME: Francine Young TITLE: Paralegul					
SIGNATURE:			PHONE:		
OFFICE: ************************************					
APPROVED: DATE:					

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance Refund Branch Crystal Park One, Room 802B